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INControl *Diabetes*

DIABETES PREVENTION AND CONTROL PROGRAM MISSION:

TO REDUCE THE BURDEN OF DIABETES IN INDIANA THROUGH DATA SURVEILLANCE, HEALTH COMMUNICATIONS, HEALTHY SYSTEMS DEVELOPMENT, AND DEVELOPMENT AND IMPLEMENTATION OF COMMUNITY INTERVENTIONS AND PROGRAMS.

Diabetes and Tobacco = Double Trouble

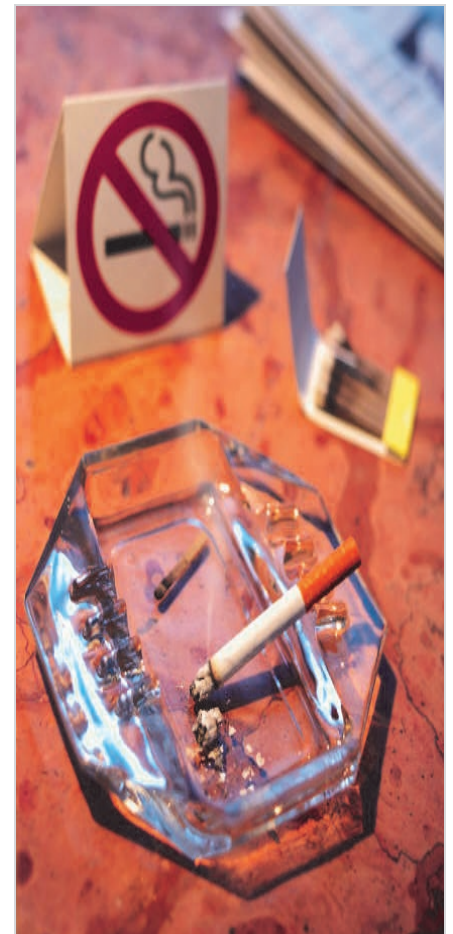
Submitted By: Rizwana Biviji, M.S., Epidemiologist, Indiana State Department of Health

Tobacco use is the single most preventable cause of death in United States. Smoking alone is responsible for more than 9,800 premature deaths. Twenty-six percent adults in Indiana are current smokers. Out of these, around 28% adult men and 24% adult women are smokers.

Indiana adults who smoke have an increased risk for diabetes as compared to adults who do not smoke. Smoking can aggravate health conditions that people with diabetes already face and is known to exacerbate diabetes related complications. Smoking increases cholesterol and blood pressure, which lead to an increased risk of heart complications. Smoking is known to damage and constrict blood vessels which lead to vascular disease. There is an increased risk of nerve damage which can ultimately lead to kidney, leg, feet and eye complications. Smoking is known to raise the blood sugar levels making it harder to control diabetes.

- Twenty-two percent of Indiana adults with diabetes were current smokers.
- Of those, 19.0% are female smokers with diabetes as compared to 24.5% males.

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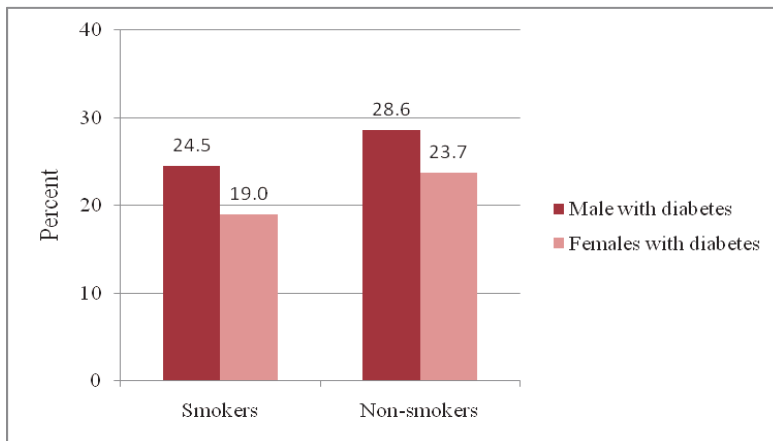


Indiana's Diabetes Burden Report "Diabetes in Indiana: A Report on Morbidity and Mortality" is to be released in March 2010.

This report contains 2008 BRFSS prevalence data, 2006 mortality Data, 2008 blindness and renal data. This report highlights the prevalence, mortality, trends, complications and disparities associated with diabetes mellitus in Indiana.



- The proportion of black adult smokers with diabetes is similar to white adult smokers with diabetes (25%).
- Adults with diabetes were more likely to smoke (26%) if their annual income was below \$15,000.
- Adults with diabetes were less likely to smoke (8%) if they held college degrees.



Source: Behavioral risk factor surveillance system (BRFSS), Indiana 2008

References:

Behavioral risk factor surveillance system (BRFSS), Indiana 2007 & 2008

Indiana Tobacco Prevention and Cessation, Fact Sheet: Smoking and Indiana women, 2009, <http://www.in.gov/itpc/files/women.pdf>

Indiana State Department of Health, Diabetes Prevention and Control Program, Fact Sheet: Diabetes and Smoking, 2009, <http://www.in.gov/isdh/files/>

- **22% adults who smoke also have diabetes.**
- **The risk of developing type 2 diabetes is 44% higher in smokers than in non-smokers.**
- **Smoking triples the risk of dying from cardiovascular disease in those with diabetes who smoke compared to those with diabetes who do not smoke.**
- **Those adults with diabetes who smoke have the highest percentage of depression (45%) as compared former smokers or non-smokers 25%)**

More data and statistics can be found at www.Diabetes.in.gov

County Level Data Availability and Limitations

It is interesting to know the prevalence of diabetes at county level and to compare which counties are most impacted with diabetes. However, we do not have a complete data set covering the county level diabetes data.

The Diabetes Program at CDC produced county level estimates which can be found at: http://apps.nccd.cdc.gov/DDT_STRS2/CountyPrevalenceData.aspx?mode=DBT

Lake and Marion counties have data through the SMART BRFSS, and the prevalence is not significantly different from Indiana's in 2008. When taking the 95% confidence intervals, there are very little differences among the counties. There is another group working on producing more accurate county-level BRFSS data, which is supposed to be out by Spring 2010.

(As told to Rizwana Biviji by Linda Sternock, Data Analyst, Epidemiology Resource Center, Indiana State Department of Health)

Free Materials Available



The American Diabetes Association's "A Guide to Changing Habits" is available to download for FREE in English and in Spanish at www.YourDiabetesInfo.org. This handout complements the promotional materials that were available in November as part of National Diabetes Awareness Month. Using simple language and concepts, this piece guides the reader on how to make a plan and set goals.



Control Your Diabetes Brochure



**National Diabetes
Education Program**

The ISDH—Diabetes Prevention and Control Program (DPCP) and Indiana Tobacco Collation (ITPC) have collaborated to publish a brochure that individuals can use to educate patients, family members, friends, etc. with diabetes about additional risks if they use tobacco products. Coming in February on the DPCP website at: www.diabetes.in.gov.

The **YMCA** of Greater Indianapolis Offers the Diabetes Prevention Program

Submitted By: Anne Graves, Director of Healthy Initiatives and Partnerships, YMCA of Greater Indianapolis

Pre-diabetes is the condition that occurs when a person's blood glucose levels are higher than normal, but not high enough for a diagnosis of diabetes. There are 57 million people in the United States who have pre-diabetes. Studies have shown that people at risk for can prevent or delay the development of type 2 diabetes by up to 58 percent through changes to their lifestyle that include modest weight loss and regular exercise.



The YMCA of Greater Indianapolis has partnered with the IU School of Medicine to offer the Diabetes Prevention Program (DPP). The DPP program is an evidence based program, based on the curriculum of the original DPP study, which is proven to aid in the prevention of diabetes for pre-screened individuals who are considered at risk for diabetes. Lead by certified DPP instructors, classes meet weekly for 16-weeks in a group setting where personal lifestyle goals are set for each individual. The two major goals of the DPP lifestyle intervention are to reduce and maintain individual weight loss by five to seven percent and increase physical activity to 150 minutes per week. For more information on the YMCA Diabetes Prevention Program, to register, or refer into the program, contact the YMCA at 317.266.9622 or agraves@indymca.org.

NEWSLETTER CONTRIBUTIONS

The Diabetes Prevention and Control Program (DPCP) will be publishing newsletters on a quarterly basis during 2010. The intent of the newsletter is to network diabetes health care professionals around the state of Indiana, make readers aware of current programs and opportunities throughout the state, and to provide you with the most current data and information on diabetes.

If you have any suggestions, articles, current events or topics in your area, that you would like to be apart of the next newsletter, please call Mindi at 317.233.7755. The deadlines are as follows for 2010.

2nd Quarter Deadline Submission: March 15

3rd Quarter Deadline Submission: July 12

4th Quarter Deadline Submission: October 11

Home Needle Disposal in Indiana



Indiana has not developed its own written regulations on safe disposal of syringes used by individuals at home. Each of the 92 counties within the State follow their own guidelines, whether it is federal guidelines (EPA), guidelines which the county itself created, or no guidelines exist because they were never discussed or considered. Variation among the counties is why there is often confusion among Indiana residents of what should be done with used syringes and sharps.

To clarify any confusion that exists, residents should encourage their local officials and legislators to author and/or support legislation regarding the proper disposal of home-generated sharps in Indiana. However, since no current State legislation exists, the Indiana State Department of Health Diabetes Prevention and Control

Program, the Indiana State Diabetes Advisory Council, and other supporting agencies suggest the following disposal methods in order to reach the primary goal of preventing sharps from entering the household waste stream:

In your community (contact your local health department to find out, what is available in your area):

Drop-off collection sites: Sharps users can take their filled sharps container to appropriate collection sites, which may include doctors' offices, hospitals, health clinics, pharmacies, health departments, community organizations, police and fire stations, and medical waste facilities. These programs may distribute appropriate sharps containers or give self-injectors the option of continuing to use empty household containers to collect sharps.

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Fast Facts

Hoosiers 65 years and older (12.7% of Indiana's population) had a diabetes prevalence of 21.2% in 2008. ⁽¹⁾

Diabetes was the **7th leading cause of death in Indiana** in 2006. It was the 4th leading cause of death for Blacks, 7th for Whites, and 6th for Hispanics/Latinos. ⁽²⁾



Continued... Home Needle Disposal in Indiana (page 3)

Household hazardous waste collection sites: Self-injectors can place their used sharps in a special sharps container, or in some cases, an approved household container, then take them to municipal household hazardous waste collection sites and place them in the sharp collection bins.

Residential special waste pickup services: Self-injectors can place their used sharps in a special container, similar to a recycling container, and put it outside their home for collection by trained special waste handlers. Some programs require customers to call for pickup, while others offer regular pickup schedules.

Mail-back programs: Used sharps are placed in special containers, which are mailed (in accordance with the U.S. Postal Service requirements) to a collection site for proper disposal. Mail-back programs are available for individual use by sharps users, and can also serve as a disposal method for community collection sites. These programs work well for rural communities, communities that don't already have a medical waste pickup service, and individuals who wish to protect their privacy.

Syringe exchange programs: Sharps users can exchange their used needles for new needles. Exchange programs are usually operated by community organizations, which properly dispose of the used needles collected at exchange sites.

Home needle destruction devices: A variety of products are available that clip, melt, or burn the needle and allow the sharps user to throw the syringe or plunger in the garbage. The devices can reduce or eliminate the danger of sharps entering the waste stream.

If none of these options are available in the community, a last resort is to dispose of the used syringes/sharps in a heavy duty plastic bottle such as a laundry detergent bottle and tape the lid shut. (Do not use coffee cans – they are not puncture resistant) On the outside of the bottle, where it can be easily seen, write "WARNING: SYRINGES - DO NOT RECYCLE" on the outside and then place in the household trash.

Reference: Indiana Department of Health, Diabetes Control and Prevention Program, <http://www.in.gov/isdh/files/NeedleDisposal.pdf>

Ask, Advise, Refer

Educate & Refer Your Patients

The Indiana Tobacco Quitline is a highly effective, evidence-based tobacco cessation program available by phone to Indiana residents. Educate your patients through the Indiana Tobacco Quitline. **Ask** your patients if they use tobacco products. You can **advise** patients to stop using tobacco and **refer** them the toll-free number for the Indiana Tobacco Quitline. In addition, you have the opportunity to *proactively* refer patients to the Quitline via a toll-free fax number before they leave your office. With the fax referral system, you consult with the patient regarding their tobacco use and gain their consent for referral with the fax referral form.

Help your patients QUIT NOW. The Quitline is available 7-days-a-week from 8am-12am EST. Services are available in both English and Spanish. For other languages, translation is available through Interpretive Services. TTY services are also available for the hearing impaired.

You can learn more, order FREE fax referral forms, order free promotional materials, and much more at www.indianatobaccoquitline.net



Refer to the Quitline

Referring to the Quitline is designed so you can **ASK**, **ADVISE**, and **REFER** patients to the Quitline.

- 1) **ASK** your patient about their tobacco use, document it, and then:
- 2) **ADVISE** your patient to quit and assess readiness to quit within the next 30 days and interest in receiving phone counseling.
- 3) **REFER** to the Indiana Tobacco Quitline. If your patient is ready to quit. Fill out the fax referral form along with your patient and have them sign for the consent as required by HIPPA. (Forms available online.)
- 4) Fax the form to: 800.483.3114
- 5) Refer the patient to a physician to prescribe pharmacotherapy, if appropriate.

They will take it from there—It's that simple! The Quitline will fax back a report to the physician office to be placed in the patient's file. The report will indicate whether or not the patient was reached, enrolled in services, as well as their plan for quitting.

Upcoming Programs & Events

Tri-State Association of Diabetes Educators (TRADE) 26th Annual Workshop



Date: Thursday, May 6, 2010

Location: Southern Indiana Career and Technical Center
1901 Lynch Road
Evansville, IN 47711

Working Title: "Diabetes in Children, Teens, and Young Adults"

*Provides 6-7 hours of Continuing Educations for RD's, RN's, and RPH's.

For more information please contact Mary Tim Griffin, RD, LD
at 270.852.5454 or mary_griffin@ky.gov



American Diabetes Alert Day is March 23

Join the movement to Stop Diabetes on
March 23 — American Diabetes Alert
Day. Visit www.diabetes.org and get
involved today. Or contact your local
American Diabetes Association at
317.352.9226 to learn more.



Indiana Project Ice Trainings

Project ICE is a three-year program, funded through the Health Resources and Services Administration, designed to improve the health and well-being of persons with mental illness and/or intellectual disability who also manages diabetes and reside in a rural Indiana county. It is directed by a consortium of service providers that includes Anthony Wayne Services, MDwise, ADVANTAGE Care Select, and ASPIN.

The initial trainings will be a series of face-to-face interdisciplinary presentations for care-providers on diabetes, mental illness and intellectual disabilities and how these delivery silos can support coordinated care for the targeted population. Care-providers include Direct Support Professionals, Mental Health Case Managers and Clinicians, Certified Diabetes Educators, Nurses, and other health care professionals that touch those impacted by diabetes and a mental illness or intellectual disability.

Trainings are FREE and will be held in seven regional Indiana locations beginning in January 2010. CEU's/Contact hours are available, please visit www.indianaprojectice.org for more information.*

"An application has been submitted to the Indiana State Nurses Association for approval of 4.5 contact hours. ISNA is accredited as an approver of continuing education by the American Nurses Credentialing Center's Commission on Accreditation."

Registration is required to attend. Please register at www.indianaprojectice.org



Project Ice Training Dates/Locations

Date	Location	Address	City/Zip	Time
Thursday, January 28	Crawfordsville District Library	205 S. Washington St.	Crawfordsville, IN 47933	10am-4pm (ET)
Thursday, February 4	Good Samaritan Home (Eva Auditorium)	520 S. 7th St.	Vincennes, IN 47591	10am-4pm (ET)
Tuesday, February 9	Porter-Starke Services	701 Wall St.	Valparaiso, IN 46383	10am-4pm (ET)
Friday, February 12	Oaklawn	2600 Oakland Ave.	Elkhart, IN 46517	10am-4pm (ET)
Wednesday, February 17	Four County Counseling Center	1015 Michigan Ave.	Logansport, IN 46947	10am-4pm (ET)
Wednesday, February 24	Grant Blackford Milestone Addiction Services	116 E. 32nd St.	Marion, IN 46953	10am-4pm (ET)

Remember to register on-line! If you have any questions, please feel free to contact
Bart Marshall, Clinical Coordinator at 317.471.0000 or bmarshall@aspin.org

Survey Results

In December 2009, the Indiana State Department of Health's Diabetes Prevention and Control Program sent out a survey to diabetes support and diabetes education program throughout the state in order to receive input on current program offerings and program needs. Below are the aggregate results based on the surveys findings of those who participated in the surveys throughout the state.

- 52% of organizations in Indiana offering Diabetes Education Programs also offer Tobacco Cessation Referrals.
- **38% of organizations in Indiana offer both Diabetes Education Program and Diabetes Support Programs.**
- The frequency in which group Diabetes Education sessions are held throughout the year is 39% monthly, 36% weekly, 10% bi-monthly, and 15% as needed basis.
- **285 was the average number of individuals enrolled in a Diabetes Education program within the last year.**
- The average number of individuals attending each Diabetes Support group meeting:
 - 1-10 individuals: 22%
 - 11-20 individuals: 57%
 - 21-30 individuals: 13%
 - 31-40 individuals: 0%
 - 41-50 individuals: 4%
 - 50+ individuals: 4%

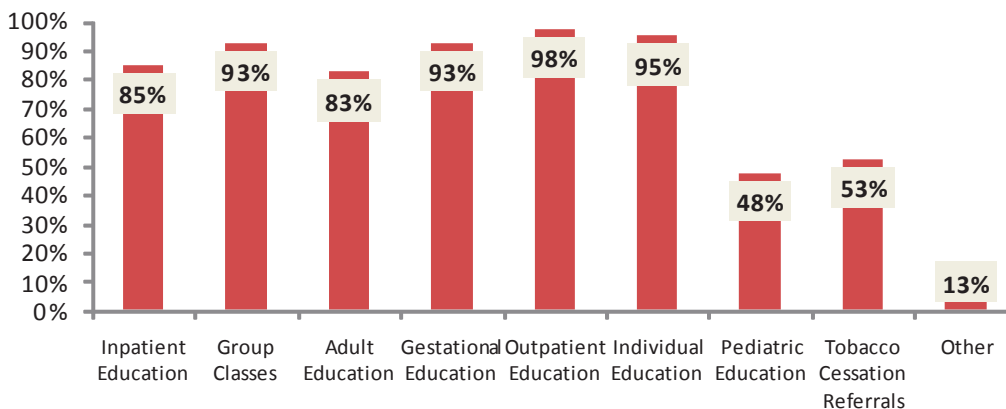


The Survey Question Asked,

“What is your organizational doing to encourage participation and market your Diabetes Support and Diabetes Education programs?”

- Advertising in newsletters, newspaper ads, flyers, postcards, radio spots, websites
- Surveying the support group once a year to assist with program planning for the following year
- Spreading by word-of-mouth
- Offering the programs in both English and Spanish
- Sending direct mailings to previous patients
- Sending reminder letters each month
- Offering the Diabetes Support groups free of charge
- Providing a list of topics with the time and dates for the entire year to promote the support group
- Having participants pick topics and speakers for the year (involving outside speakers)
- Providers referrals and meeting with providers
- On-going CQI
- Holding meeting with other diabetic educators within the organization/network on a routine basis
- Writing brief articles for the newspaper highlighting the importance of diabetes education
- Increasing the frequency of class times (early AM times, late PM times, Saturdays)
- Utilizing ADA conversation maps
- Continuously changing instruction techniques and materials
- Offer the classes in a variety of ways (i.e. one-on-one, group AADE format, ADA conversation format, etc.)

**Organizational program offerings by %– The Survey Question Asked,
“Do you offer any of the following programs or services at your organization?”**



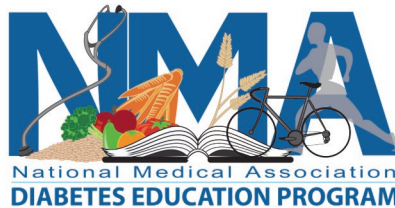
Others Include:

- MTM Drug Reviews
- Inpatient diabetes survival information is supplied by staff nurses
- Insulin pump and continuous glucose monitoring
- Education ordered by the physician

Collaborative Partners*



**Indiana Central Association
of Diabetes Educators
ICADE**



The National Medical Association (NMA) Diabetes Education Program is now on FACEBOOK. This social media tool is another instrument the program uses to inform the public about diabetes and programmatic developments. The NMA Diabetes Education Program is in its fifth year of existence. Through the utilization of the (6) established NMA coalitions in Atlanta, Houston, Los Angeles, Pine Bluff, the District of Columbia and Indianapolis, the NMA has been able to cover significant ground and share information about diabetes to African Americans/Blacks and the wider community as a result of its collaborative outreach efforts. Since the program's inception five years ago, over 200 hundred and five outreach activities have been completed.

* Logos used with permission of organizations.

FREE Presentations

The **American Diabetes Association** offers **free** community presentations to help your diabetes and pre-diabetes patients manage or prevent this devastating disease. Contact your American Diabetes Association in Indiana at 317.352.9226 to learn more about scheduling a presentation at your office, hospital, clinic or school.

If you would like to be added to the email mailing list to receive this quarterly newsletter, please contact: Diabetes Prevention and Control Program, Phone: 317.233.7755 or Email: mmatthews@isdh.IN.gov



**Indiana State Department of Health
Diabetes Prevention and Control Program
Health and Human Services Commission**

Marjori S. Allen, R.N., C.P.M., M.B.A.-H.C.M.
Chronic Disease Division Director

Laura T. Heinrich, R.D., C.D.
Program Director

Mindi M. Matthews, M.B.A.
Health Educator

Rizwana A. Biviji, M.S.
Epidemiologist

Pam McVey
Program Secretary



Indiana Quitline Monthly Reports - December 2009

- 1,069 residents registered for services and of those 977 were tobacco users (91%).
- 720 tobacco users enrolled into proactive counseling.
- 132 enrollments occurred from fax referrals.
- 25% of callers heard about the Quitline through Health Professional and Family/Friend each, followed by TV/Commercial at 11%.



*Diabetes kills more Americans
every year than breast cancer
and AIDS combined.*

*It's the #1 cause of blindness
in adults*

*It doubles the risk of
heart attack & stroke.*

*1 in 13 of all Americans have it.
1 in 4 of those don't know it yet.*

*1 in 5 are on their way
to getting it.*

**Now that you know,
here's how you can help.**

Share your personal story as a way to inspire others. **Act** by volunteering your time to help in your community. **Learn** about diabetes. Get screened. If you have diabetes, find out the best ways to manage it. **Give** your time, your financial support, your hope for a cure. Help us Stop Diabetes once and for all.
stopdiabetes.com • 1-800-DIABETES

